PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application or Docket Number												nber -
CLAIMS AS FILED - PART I SMALL E (Column 1) (Column 2) TYPE D											OTHER	
F	OTAL CLAIMS			1 11			RA	<u>_</u> _	FEE	OR 7.	SMALL	
			NUMBER FILED		NUMBER EXTRA		BASIC			-	BASIC FEE	770.00
FOR .									383.00	ЮН		
TOTAL CHARGEABLE CLAIMS			O minus 20=		. 0		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =				X43=			OR	X86=	·
MULTIPLE DEPENDENT CLAIM PRESENT						+145=			OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II									يوسو	•	OTHER	THAN
					nn 2)	SMA	SMALL ENTITY		OR	SMALL	ENTITY	
AMENDMENT A	21200	REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 12	Minus	-2	0	- /	XS 9	Ħ		OR	X\$18= :	
	Ind pendent	• /	Minus	- 3	) ·	-/	X43		7	OR	X86=	
5	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-/-		+290=	
1-0/0/0							+145	TAL	-	OR	TOTAL	
(Column 1) (Column 2) (Column 3)							ADDIT.	EE	1	OR	ADDIT. FEE	
		(Column 1) CLAIMS		HIGH	ESY	(Column 3)	_	_	ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	RAT	E	TIONAL		RATE	TIONAL
	Total	. 1.5	Minus	<b>-</b> ∂	Ø:	- \	X\$ 8	=		OR	X\$18=	
	Independent	ATATION OF M	Minus	SENDENT	CAIM		X43	-		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .							+145			OR	+290=	
							ADDIT.	EE	• 1	OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colum		(Column 3)						
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	JER USLY	PRESENT . EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	•		-	X\$ 9	寸		OR	X\$18=	
里	Independent	•	Minus	***		-	X43	4			X86=	
[	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4		OR	AU02	
• H.th. gathy is solven to be have then the easter to enhance to real and the section of							+145		]	OR	+290=	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								•	OR	TOTAL ADOIT, FEE	
		moer Previously Pai der Previously Pai					r found in th	epp	ropitat bas	in col	umn 1.	·
FORM PTO-675 (Rev. 1983) Patient and Trademark Office, U.S. DEPWRTMENT OF COMMERCE												COMMERCE